

PLEASE READ THESE INSTRUCTIONS CAREFULLY**WHO CAN ORDER A DEATH CERTIFICATE?**

Complete copies of a certified death certificate will be issued to anyone who submits a completed application, establishes their identity, and lists the reason for needing the copy. If a death certificate lists the cause of death as "pending autopsy" or "pending investigation", a certified copy which has the cause of death information removed will be issued.

IDENTIFICATION IS REQUIRED

The person signing the request must provide an enlarged legible photocopy of both sides of their valid driver's license or other legal picture identification with a signature or the requestor must have this application notarized.

Suggested Identification**Picture ID with a Signature**

- Driver's License
- State ID Card
- Passport
- Military ID Card
- Tribal

OR Two Forms of ID- One Must have a Signature

- Social Security Card
- Work ID card
- Car registration/insurance
- Doctor/Medical Record
- Fishing License
- US Military DD214
- Utility Bill with a current address
- Voter Registration Card
- Credit/Debit/ATM Card
- School ID card
- Library Card
- Insurance Record
- Pay Stub
- Traffic/Pawn ticket
- Court record
- Year Book

OR

- Notarized Montana Office of Vital Statistic Statement to Identify certified Birth or Death Certificate Applicant Form (you must provide the original letter, not a photocopy or faxed copy)
- Have authorized family member that has an ID order the certificate

If a picture ID with a signature is not available, two other forms of identification are required, one **MUST** have a signature. Please include photocopies of both sides of the ID when mailing your request

IMPORTANT: If the identification requirement is NOT met or if the application is incomplete, your request will be returned and significant delays in processing your order may occur.

FEE (All fees must be U.S. funds)

- **CERTIFIED COPIES OF A DEATH CERTIFICATE** cost \$3.00 for each copy, (non-refundable)
- **INFORMATIONAL COPIES OF A DEATH CERTIFICATE**, the cost is \$.50. (non-refundable)
- **SEARCHES** \$.50 for each year. (An informational copy will be issued if record is found) (non-refundable)

Please complete as much of the following information as possible.

Decedent's Name: _____
 Date of Death (We need a date to begin searching if date is unknown) : _____ Date of Birth: _____
 Place of Death: _____ Place of Birth: _____
 Parents Names: _____
 Occupation: _____ Spouse's Name: _____
 Number of Copies _____ Type of record needed? Certified _____ Non Certified _____
 Reason record is needed: _____

Mailing or Delivery Address:

Name: _____

Address: _____

City, State, Zip: _____ Daytime Telephone Number: _____

Signature of Applicant: _____ **Relationship:** _____

RETURN FORM, MONEY ORDER OR CASH TO:

**CLERK & RECORDER
 155 W GRANITE RM 208
 BUTTE MT 59701**

Notary (For use if need)

_____ personally appeared before me and whose identity I proved on the basis of satisfactory evidence to be the signer of the above instrument.

Subscribed and sworn to before me this _____ day of _____ 20____

SEAL

Signature: _____

Printed Name: _____

Notary Public in and for the State of _____

Residing at _____ **My commission Expires** _____

Official Use Only

Date _____

Rec# _____

Amount _____

Cert # _____

Ser # _____

Comment _____

NOTICE: STATE LAW PROVIDES PENALTIES FOR PERSONS WHO WILLFULLY AND KNOWINGLY USE OR FURNISH TO ANOTHER FOR USE, FOR ANY PURPOSE OF DECEPTION ANY CERTIFICATE, RECORD REPORT, OR ANY CERTIFICATE, RECORD REPORT. OR CERTIFIED COPY MADE. ALTERED. AMENDED. OR MUTILATED. (50-15-114). MCA)